APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

l verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PROCESS FOR PREPARING IODOAROMATIC COMPOUNDS AND USING THE SAME

			THE COM CONDUM						
Chec	b.	ittached hereto.	d understand the contents	and amended on of the above-identified specifi	_ (if applicable). cation, including the claims,				
appli	37, Code of Federal	Regulations, §1.56. ted States provisional	Under Title 35, U.S. Code	n known to me to be material to e §119, the priority benefits of t e or my legal representatives or	the following foreign				
The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):									
applie	l hereby appoin cation and to transac	t the following as my et all business in the P	attorneys of record with fatent Office:	full power of substitution and re	evocation to prosecute this				
	Kevin F Nola M James A Willian Kirk M Thoma Edward	Costello F. Chapuran R. Kepner (ae McBain A. Oliff n P. Berridge I. Hudson s J. Pardini d P. Walker A. Miller	Reg. No. 31,342; Reg. No. 26,402; Reg. No. 32,145; Reg. No. 35,782; Reg. No. 27,075; Reg. No. 30,024; Reg. No. 27,562; Reg. No. 30,411; Reg. No. 31,450; Reg. No. 32,771;	Elizabeth F. Harasek Eugene O. Palazzo Mario A. Costantino Joel S. Armstrong Christopher W. Brown Richard E. Rice Paul Tsou Eric D. Morehouse	Reg. No. 28,850; Reg. No. 20,881; Reg. No. 33,565; Reg. No. 36,430; Reg. No. 38,025; Reg. No. 31,560; Reg. No. 37,956; and Reg. No. 38,565.				
	RIDGE, PLC, P.O.	. BOX 19928, ALEX	ANDRIA, VIRGINIA 2	LICATION SHOULD BE SE 2320, TELEPHONE (703) 83	36-6400.				
stater impri	y own knowledge are ments were made wit sonment, or both, ur	e true and that all state th the knowledge that nder Section 1001 of	ements made on informati willful false statements a	nts of this Declaration, and that ion and belief are believed to be nd the like so made are punishe tes Code and that such willful f	e true; and further that these able by fine or				
1	Typewritten Ful of First or Sole		Н.	Bruce	Goodbrand				
2	**INVENTOR'	'S SIGNATURE:	Given Name	Middle Initial	Family Name				
3	**DATE OF SIGNATURE:		Anil	110	2004				
5			Month	Day	Year				
	Residence:	Hami Cir		Ontario State or Province	Canada Country				
	Citizenship:	Canada Post Office Addres (Insert complete mailing address,							

**Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

*This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

including country)

Hamilton, Ontario, Canada L8P 4N9

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE \Box

Page 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

1	Typewritten Full Name				
	of Second Join	t Inventor (if any)	Timothy Given Name	P. Middle Initial	Bender Family Name
•			Given Name	Window mittai	raining ivanic
2		R'S SIGNATURE:	Suffy		
3	**DATE OF SIGNATURE:		April	16	2004.
			Month	Day	Year
	Residence:	Port Credit	Ontario		Canada
		City	State or Province		Country
	Citizenship:	Canada			
		Post Office Address:	007 10 11 1 0 4 21		
		(Insert complete mailing address,	905-12 Helene Street N		
		including country)	Port Credit, Ontario, Canada L5G 3B5		
1	Typewritten Full Name		**************************************		
	of Third Joint Inventor (if any)		Roger	E.	Gaynor
			Given Name	Middle Initial	Family Name
2	**INVENTOR'S SIGNATURE:		More May	no	
3	**DATE OF SIGNATURE:		I soull		2004
3	DATEON		Month	Day	Year
	Residence:	Oakville	Ont	ario	Canada
	Residence.	City	State or Province		Country
	Citizenship:	Canada			
	Citizensinp.	Post Office Address:			
		(Insert complete	514 Vanguard Crescent		
		mailing address,			
_	including country)		Oakville, Ontario, Canada L6L 5G7		
1	Typewritten Full Name of Fourth Joint Inventor (if any)		Leanne		Murphy
	oj Pourin Join	u inventor (ij uny)	Given Name	Middle Initial	Family Name
2	**INVENTOR'S SIGNATURE:		Leanne	Muse	•
2			9	1 0	- //
3	**DATE OF S	SIGNATURE:	O 4 Month	Day	<u> </u>
) (in -in		·	Canada
	Residence:	Mississauga City	Ontario State or Province		Country
			State of Flovince		Country
	Citizenship: Canada				
		Post Office Address: (Insert complete	3360 Council Ring Road, Unit 64		
	mailing address, including country)		Mississauga, Ontario, Canada L5L 2E4		
1	Typewritten Full Name				
	of Fifth Joint Inventor (if any)			3.4: 1.11 - 72: -1	Family Name
			Given Name	Middle Initial	ramily Name
2	**INVENTOR	'S SIGNATURE:			
3	**DATE OF S	IGNATURE:			
	Residence:		Month	Day	Year
		City	State or Province		Country
	Citizenship:				
		Post Office Address:			
		(Insert complete mailing address,			
		including country)			

^{**}Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.